Standard Set of Patient-Centered Stroke Outcomes 1	

SUPPLEMENTAL MATERIAL

An International Standard Set of Patient-Centered Outcome Measures After Stroke

Supplemental Table I. Stroke Working Group member specialties and register/institutional affiliations

Country	Clinical Specialty	Name	Register/Institutional affiliation
Australia	Neuro-	Julie Bernhardt,	The Florey Institute of Neuroscience and Mental
	Rehabilitation	PhD	Health
Brazil	Vascular Neurology	Sheila C.O.	Hospital Moinhos de Vento, Brazil National
		Martins, MD,	Stroke Registry
		PhD	
Canada	Vascular Neurology	Eric E. Smith,	Hotchkiss Brain Institute and Department of
		MD, MPH,	Clinical Neurosciences, University of Calgary
		FRCPC, FAHA	
Canada	Vascular Neurology	Frank L. Silver,	University of Toronto, Ontario Stroke Registry
		MD, FRCPC	
Canada	Stroke Nursing	Patrice Lindsay,	Heart and Stroke Foundation of Canada, Ontario
		RN, PhD	Stroke Registry
China	Vascular Neurology	Liping Liu, MD	Capital Medical University, Beijing Tiantan
			Hospital
The	Neuro-	Gerard Ribbers,	Erasmus University MC, Rijndam Rehabilitation
Netherlands	Rehabilitation	MD, PhD	Center
Sweden	Vascular Neurology	Bo Norrving,	Department of Clinical Sciences, Neurology,
		MD, PhD	Lund University, Swedish Stroke Register
			(Riksstroke)
UK	Stroke Occupational	Stephanie	Advanced Practitioner Occupational Therapist,
	Therapy	Gething, Dip	Aneurin Bevan University Health Board
		COT, MSc	·
UK	Vascular Neurology	Charlie Davie,	UCLPartners Academic Health Science Network,
		MD, FRCP	Royal Free London NHS Foundation Trust
USA	Vascular Neurology	Lee H.	Department of Neurology, Massachusetts
		Schwamm, MD	General Hospital, Harvard Medical School,
			American Heart Association Get With The
			Guidelines-Stroke registry, Centers for Disease
			Control and Prevention Paul Coverdell National
			Acute Stroke Registry, Joint Commission
			Primary & Comprehensive Stroke Center
			Certification Technical Expert Panels
USA	Neurology	Joel Salinas,	Department of Neurology, Massachusetts
		MD, MBA	General Hospital, Harvard Medical School,
USA	Senior Medical	Mary G.	Paul Coverdell National Acute Stroke Registry,
	Officer and Deputy	George, MD,	Centers for Disease Control and Prevention
	Associate Director	MSPH, FACS	Division for Heart Disease and Stroke Prevention
	for Science		
USA	Vascular Neurology	Adam G. Kelly,	University of Rochester Medical Center
		MD	
USA	Stroke Patient	Teri Ackerson,	American Heart Association/American Stroke
	Representative	SCRN, BSN	Association, Liberty Hospital
USA	Vascular Neurology	Linda S.	Veteran's Administration Stroke QUERI Project
		Williams, MD	
USA	Cardiovascular	Louise Morgan,	American Heart Association/American Stroke
	Nursing and	MSN, CPHQ	Association, Get With The Guidelines-Stroke

Director,	I	Registry
International Quality		
Improvement;		
Stroke Patient		
Representative		

Supplemental Table II. Voting percentages of modified Delphi method by working group members by individual outcome domains. A majority vote was required for consideration for inclusion.

	Outcome	Final vote in favor of inclusion (final vote)
-	All-cause mortality	100%
	Patient reported general health status	100%
	Global patient reported health-related quality of life	100%
	Mood	100%
	Self-care and grooming	100%
	Mobility	100%
	Symptomatic intracranial hemorrhage after ischemic stroke	100%
ed	Pain and other unpleasant sensations	91%
Included	Ability to return to usual activities	91%
Inc	Global cognitive function	90%
	Readmission for ischemic stroke	90%
	Readmission for ICH	90%
	Feeding	82%
	Ability to communicate (including nonverbal means)	82%
	Social participation	73%
	Fatigue	70%
	Smoking cessation	70%
	Stroke due to carotid artery intervention	57%
pə	Major systemic hemorrhage	50%
	Early neurological worsening	44%
Excluded	Hospital acquired pneumonia	43%
Ex	Sexual function	40%
	Effort required to return to usual activities	30%
	Sleep quality	20%

Supplemental Table III. Summary of the demographic data elements, risk adjustment variables and other covariates included in the ICHOM Standard Set for stroke, and the recommended data source and timing.

	Measure	Timing	Data Source
General patient demographics			
Age	What is your date of birth?	Admission ^a	Administrative or patient-reported
Sex	Please indicate your sex at birth	Admission	Administrative or patient-reported
Race/Ethnicity	To be determined by country	Admission	Patient-reported
Prestroke functional status	Are you able to ambulate?	Admission	Medical record or patient-reported
status	Do you receive help from anybody to go to the toilet?		
	Do you receive help with dressing/undressing?		
Living location	Where were you staying prior to your stroke or TIA?	Admission	Patient-reported
	Where are you staying now?	90 days ^b	Patient-reported
Living alone	Do you live alone?	Admission and 90 days	Patient-reported
Stroke type and severity			
Stroke severity	National Institutes of Health Stroke Scale (NIHSS)	Admission	Medical record
Stroke severity	What is the patient's level of consciousness?	Admission	Medical record
Stroke type	Indicate stroke type	Admission	Medical record
Duration of symptoms	Indicate the duration of symptoms	Admission	Patient-reported
Vascular and systemic			

Prior stroke	Prior to this hospitalization, have you ever been told by a doctor that you have had a stroke?	Admission	Medical record or patient-reported
Prior TIA	Have you ever been told by a doctor that you have had a transient ischemic attack (this is sometimes called a TIA or ministroke)?	Admission	Medical record or patient-reported
Prior MI	Have you ever been told by a doctor that you have had a heart attack (this is sometimes called a myocardial infarction, or MI)?	Admission	Medical record or patient-reported
Coronary artery disease	Have you ever been told by your doctor that you have coronary artery disease?	Admission	Medical record or patient-reported
Atrial fibrillation	Have you ever been told by your doctor that you have atrial fibrillation?	Admission	Medical record or patient-reported
Diabetes mellitus	Have you ever been told by your doctor that you have diabetes?	Admission	Medical record or patient-reported
Hypertension	Have you ever been told by a doctor that you have high blood pressure (this is sometimes called hypertension)?	Admission	Medical record or patient-reported
Hyperlipidemia	Have you ever been told by your doctor that you have high cholesterol (this is sometimes called hyperlipidemia or dyslipidemia)?	Admission	Medical record or patient-reported
Smoking	Do you currently smoke, or have you smoked over the past year?	Admission	Patient-reported
Alcohol use	Do you drink more than one standard alcoholic drink a day?	Admission	Patient-reported
Treatment/care related			
Length of stay	Date of admission for index event and date of discharge from acute care hospital	Admission and Discharge ^c	Administrative data
Diagnostic process	Indicate how the diagnosis was made	Discharge	Medical record

Rehabilitation	Did the acute inpatient care include dedicated stroke rehabilitation?	Discharge	Administrative data
	Did the post-acute care (hospital- based or not) include dedicated stroke rehabilitation, either hospital-based or outpatient/home-based?		
Discharge destination	What type of place was the patient discharged to?	Discharge	Administrative data
Comfort care (optional item)	At any point in the hospitalization, did the goals of care shift from treatment and recovery to emphasize comfort? ["Comfort care" is defined as care for a patient who is dying that helps or comforts with the goal of preventing or relieving suffering.]	Discharge	Administrative data

a Admission for index event
b 90 days after admission for index event within a 30-day window (i.e., 90 to 120 days after index admission)
c Discharge or 7 days after admission for index event (whichever occurs first)